

Additional Instructions for Applying to the HIV and AIDS Community Grants Program

Directions:

As part of submitting a complete application form, you need to apply for a DUNS number which you put on page one of the application form. You also need to complete the Application for Federal Assistance SF-424 Form. The instructions for how to complete each of these are listed below. If you have questions, please contact your nearest Community Grants Office.

DUNS Number

Successful applications require a DUNS number, also called a Unique Entity Identifier, UEI. If your organization does not already have one, you may obtain one at no cost from <http://fedgov.dnb.com/webform>. A DUNS number is a unique nine-digit identification number that is assigned to your organization. The online process to obtain one takes only about 10 minutes.

When completing the DUNS number registration, please follow these steps:

1. Click on the top of the left hand column: "Begin D-U-N-S search Request Process"
2. Enter your organization's name and address, then click "submit". If your organization is already registered and has a DUNS number, it will appear on the next screen. If you don't, click on the button that says "Request a New D-U-N-S Number"
3. Follow the prompts and enter all of the organization's information.
4. In the box asking for "legal structure", you select "non-profit".
5. For the next box "trade style name", you can leave it blank.
6. Then a little further down the page it asks for your "primary SIC code", you enter "8399 Social Services, Not Elsewhere Classified".
7. For the box where it asks for "socioeconomic data", you select "no special ownership status"
8. For the box where it asks for "annual sale or revenue", you put "0"
9. Then you click "submit your request", you'll be taken to page 2. On page two, there is a box that asks about what type of trading you'll be doing with the US, here you want to select the second option in the drop down menu "US grant or applicant".
10. Within a few days of requesting a DUNS number you will receive an email with your DUNS number; please fill this number in on your Community Grants application form.

Application for Federal Assistance SF-424 Form

Your organization must also submit a completed SF-424 form. This form can be downloaded from <https://za.usembassy.gov/our-relationship/pepfar/hivaids-community-grants/> or you can contact a Community Grants office.

When completing the SF-424, note that some boxes have been pre-populated and some boxes will be left blank. Please complete only the following:

1. Section 1. Put a check in the "Application" box
2. Section 2. Put a check in the "New" box
3. Section 8.a. "legal name"
4. Section 8.c. "organizational DUNS" - This is the organization's DUNS/UEI number.
5. Section 8.d. "address" - Use the legal address for your organization. Leave 'State' blank.
6. Section 8.f. "name and contact information of person to be contacted" (only the boxes with a * are required)
7. Section 9. "Type of applicant" – In the first box, select "W: Non-domestic (non-US) Entity".
8. Section 10. "Name of Federal Agency" – Put "State Department".
9. Section 11. Please put "19.029" in the first box and in the box marked 'CFDA Title' put "The U.S. President's Emergency Plan for AIDS Relief Programs".
10. Section 12. Leave the first box blank. In the second box, please put "U.S. Embassy SA – Community Grants - 2017" in the second box.
11. Section 15. "Descriptive title of applicant's project" – Put one line stating the purpose of the project you are seeking funding for with this application.
12. Section 16.a. and b. "Congressional districts of" – In both box a and b, put "00-000".
13. Section 17.a. "start date". This must be October 1, 2017.
14. Section 17.b. "end date". This should be September 30, 2018 unless you are applying for a two year grant from Community Grants.
15. Section 18.a. and 18.g. "estimated funding". These should be the same amount and this should be the total budget you are requesting in your application in US Dollars. So take the Rand amount you are requesting in your application and divide it by 13, so \$1 = R13 for this application.
16. Section 19.c. Check box c. "Program is not covered by E.O. 12372.
17. Section 20. Check "No" if the organization is not delinquent on any federal debt. If the organization has outstanding debt, please explain.
18. Section 21. Check "I agree" and complete the contact information for the authorized representative and then the authorized representative must sign and date. This should be the same person as listed in section 8.f.
19. Submit the completed and signed 424 form with your Community Grants application